

Safety Competencies Curriculum  
Domain 3: Communicate Effectively for Patient Safety

**CASE DISCUSSION FOR DOMAIN 3:  
COMMUNICATION FOR SAFE HEALTH CARE  
FACILITATOR GUIDE**

**Effective communication is critical to avoiding adverse events, especially during high-risk situations such as emergencies.**

- 1. Do you think that this resident is an effective communicator? Why or why not?**
  - a. Trouble with communicating with attending physician over the telephone
    - i. Discuss use of tools such as SBAR (situation, background, assessment, recommendation) or other tool used by your organization**
  - b. Poorly written order on piece of paper (not an order sheet); did not direct how quickly to give the medication. Demonstrates importance of clear orders.*
  - c. Avoided the family after the event (did not participate in disclosure process)*
  - d. Had to be called by the ICU for sign-over and to document the event
    - i. Use this opportunity to discuss sign-over and tools used by your organization as described in enabling competency 1.4**
  - e. Dislike of acute care/trouble on previous rotations – is communication contributing to this?*
- 2. What other factors contributed to this adverse event?**
  - a. Time of day – less support during middle of the night*
  - b. Experience of RN – did not know how Phenobarbital should be administered*
  - c. Lack of support of resident*
  - d. Just culture – is it present in this organization? The resident seems fearful of reprisal*
  - e. Others*
- 3. Discuss the importance of reporting adverse events such as this using resources available in your organization**
  - a. Incident reporting system*
  - b. Given severity of event, should be reported to administration*
  - c. Given severity of event, critical incident review should be completed and recommendations made to prevent future occurrences*
  - d. A complete disclosure of adverse events process should be followed with this family*
  - e. A critical incident debriefing should be completed with the individuals involved, support provided as needed*

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#### **ENABLING COMPETENCIES COVERED BY THIS CASE INCLUDE:**

- 1.4 Use of a structured communication tool with sign-over
- 2.1 Engaging families in decision-making processes
- 2.3 and 2.4 communicate to others the urgency/escalation of a clinical situation across authority gradients
  - Ineffective communication with attending over the telephone
  - Ineffective communication with ICU physician
- 2.5 Importance of communication in high-risk situation
- 2.7 Lack of insight of communication difficulty in stressful situations
  - Includes resident, nurses, attending physician
- 3.1 And 3.2 Importance of detailed entries in health care record
  - Required prompting by ICU doctor
- 3.2 And 3.4 Importance of clearly written orders